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X No

## REPORT OF RECEIPTS AND EXPENDITURES POLITICAL COMMITTEE

State Form 4606 (R12/11-04) Indiana Election Commission (IC 3-9-5-14)

IS THIS AN AMENDMENT? Yes

(CFA-4) **Summary Sheet** 

**FILE NUMBER** 

**TOTAL PAGES IN ENTIRE CFA-4 REPORT** 

FOR OFFICE HEE ONLY

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

COMMITTEE INFORMATION			
Full name of committee (as on Statement of Organization)  Check if this is a new name			
Linda L. Williams for Adams Township Truster			
2. Acronym or abbreviated name, If any	Committee telephone number		
	(3/7) 7	58-454	3
4. Mailing address (address where all campaign finance correspondence is received)  Check if this is a new address			
802 Ohin St.			
5. City, state, ZIP code	6. Party affiliation (if applicable)		
Sheridan IN 46069	Democrat		NAME OF TAXABLE PARTY.
CANDIDATE INFORMATION (For Candidate's Committees Only)			
7. Full name of candidate (include any pickpame)	Party affiliation or if independent candidate		
Linda L. Williams	Democrat		
9. Office sought (Include district number, if any. Not required for exploratory committee.)	10. County of residence		
Adams Township Trustee Hamilton			
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conver	
Final/Disbands Committee (lines 16, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement of	f Organization)	Post-Conve	ention
12. Reporting Period: September 31,	2014 00	DLUMN A	COLUMN B
From: April 16, 2104 Through: October, 15, 2		is Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		9	
14. Cash on hand and investments January 1, current year.	6000000		0
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			4)
15a. Itemized (use Schedule A)  15b. Unitemized		P	*
	TOTAL 2		<del>y</del>
	4	-	<del>- 9</del>
	TOTAL 0	Name and Address of the Owner, where	7)
(Note: These amounts include in-kind expenditures and loan repayments.)	Selection of the select		
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	-	0	a
17b. Unitemized		7	A
17c. Add lines 17a and 17b in both columns SUB	TOTAL	5	A
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL D		A
19. Debts OWED BY the committee (use Schedule D)	b		
20. Debts OWED TO the committee (use Schedule F)	1		